

Mahesh
Mob:8618385220
9901569756



ಶ್ರೀ ಪಾರ್ವತಿ ಆಪ್ಟಿಕ್ಸ್

SRI PARVATHI OPTICS

Multi Branded Opticals Store

Computerized Eye Testing & Spectacles Clinic

333, 8th Main 5th Cross Near Cambridge & Miranda School HAL 3rd Stage
Behind Vishveshwariah Park New Thippasandra, Bangalore - 560075,
Email: parvathiopticals@gmail.com

SPECTACLE PRESCRIPTION

Name: *Pratha Krishna R.* No. **6104**
Mobil No: Date: *29/11/2023*
Age / Gender *50y/M* Ref. No. *IND-575219*

	RIGHT EYE				LEFT EYE			
	SPE	CYL	AXIS	VISION	SPE	CYL	AXIS	VISION
DISTANCE	<i>Plano (0)</i>			<i>6/6</i>	<i>Plano (0)</i>			<i>6/6</i>
NEAR	<i>Add +1.50 @ 0.6</i>							

PD

Advice to use glasses for:

DISTANCE FAR & NEAR READING COMPUTER PURPOSE

We Care Your Eyes

SRI PARVATHI OPTICS
NEW THIPPASANDRA

CLUMAX DIAGNOSTICS

MEDALL HEALTHCARE PVT LTD

CUSTOMER CHECKLIST

Print Date : 29/11/2023 09:47 AM



IND595219

38



Customer Name : **MR.RAMAKRISHNA R**

Ref Dr Name : **MediWheel**

Customer Id : **IND595219** Visit ID : **423071386**

Age : **50Y/MALE** Phone No : **9945478884**

DOB : **23 Mar 1973** Visit Date : **29/11/2023**

Company Name : **MediWheel**

Package Name : **Mediwheel Full Body Health Checkup Male Above 40**

S.No	Modality	Study	AccessionNo	Time	Signature
1	LAB	BLOOD UREA NITROGEN (BUN)			
2	LAB	CREATININE			
3	LAB	GLUCOSE - FASTING			
4	LAB	GLUCOSE - POSTPRANDIAL (2 HRS)			
5	LAB	GLYCOSYLATED HAEMOGLOBIN (HbA1c)			
6	LAB	URIC ACID			
7	LAB	LIPID PROFILE			
8	LAB	LIVER FUNCTION TEST (LFT)			
9	LAB	TOTAL PROSTATE SPECIFIC ANTIGEN - PSA			
10	LAB	THYROID PROFILE/ TFT(T3, T4, TSH)			
11	LAB	URINE GLUCOSE - FASTING			
12	LAB	URINE GLUCOSE - POSTPRANDIAL (2 Hrs)			
13	LAB	COMPLETE BLOOD COUNT WITH ESR			
14	LAB	STOOL ANALYSIS - ROUTINE			
15	LAB	URINE ROUTINE			
16	LAB	BUN/CREATININE RATIO			
17	LAB	BLOOD GROUP & RH TYPE (Forward Reverse)			
18	ECG	ECG ✓	IND14349041138		
19	OTHERS	Treadmill / 2D Echo	IND143490414690		
20	OTHERS	physical examination	IND143490415279		
21	US	ULTRASOUND ABDOMEN ✓	IND143490415292		
22	OTHERS	Dental Consultation	IND143490416289		
23	OTHERS	EYE CHECKUP	IND143490417756		
24	X-RAY	X RAY CHEST	IND143490418659		
25	OTHERS	Consultation Physician	IND143490418736		

Registered By
(HARI.O)

HF - 170
WT - 90
BP - 133/109.
Pulse - 93

Name

50 Years

QRS : 82 ms

QT / QTdiaz : 332 / 395 ms

PR : 160 ms

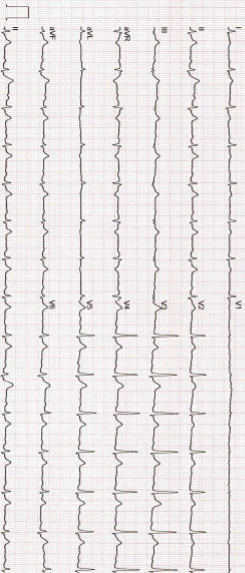
P : 102 ms

RR / PP : 704 / 705 ms

P / QRS / T : 72 / 30 / 77 degrees

Narad Eeg

Dr. SUBRAMANI, K.S
MD, DM (Cardiology)
Consultant Cardiologist
KMC Reg. No. : 46604
MEDICAL DIAGNOSTICS



Name : Mr. RAMAKRISHNA R

PID No. : IND595219

SID No. : 423071386

Age / Sex : 50 Year(s) / Male

Type : OP

Ref. Dr : MediWheel

Register On : 29/11/2023 9:47 AM

Collection On : 29/11/2023 9:59 AM

Report On : 29/11/2023 4:32 PM

Printed On : 30/11/2023 10:00 AM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Basophils (Blood)	1.0	%	00 - 02
INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.			
Absolute Neutrophil count (EDTA Blood)	3.07	10 ³ / μ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	1.60	10 ³ / μ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.14	10 ³ / μ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.45	10 ³ / μ l	< 1.0
Absolute Basophil count (EDTA Blood)	0.05	10 ³ / μ l	< 0.2
Platelet Count (EDTA Blood)	249	10 ³ / μ l	150 - 450
MPV (EDTA Blood)	7.4	fL	7.9 - 13.7
PCT (EDTA Blood/Automated Blood cell Counter)	0.18	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood)	8	mm/hr	< 15



Anusha
Dr Anusha.K.S
Sr.Consultant Pathologist
Reg No : 100674

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<u>BIOCHEMISTRY</u>			
<u>Liver Function Test</u>			
Bilirubin(Total) (Serum/DCA with ATCS)	0.50	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.21	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.29	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	47.23	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	54.26	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	184.61	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	89.8	U/L	53 - 128
Total Protein (Serum/Biuret)	7.47	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.56	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.91	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.57		1.1 - 2.2



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Lipid Profile</u>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	216.45	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	215.12	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the 'usual' circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	38.89	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	134.6	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	43	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	177.6	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.
2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.



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Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	5.6		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	5.5		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	3.5		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/HPLC)	6.0	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose 125.5 mg/dL
(Whole Blood)

INTERPRETATION: Comments

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glyemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Leukocytes(CP) (Urine)	Negative		
<u>MICROSCOPIC EXAMINATION</u> <u>(URINE COMPLETE)</u>			
Pus Cells (Urine)	0-1	/hpf	NIL
Epithelial Cells (Urine)	0-1	/hpf	NIL
RBCs (Urine)	NIL	/HPF	NIL
Others (Urine)	NIL		
INTERPRETATION: Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.			
Casts (Urine)	NIL	/hpf	NIL
Crystals (Urine)	NIL	/hpf	NIL



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Investigation

Observed
Value

Unit

Biological
Reference Interval

IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING
(EDTA Blood/Agglutination)

'AB' 'Positive'



Anusha
Dr Anusha.K.S
Sr.Consultant Pathologist
Reg No : 100674

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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>IMMUNOASSAY</u>			
Prostate specific antigen - Total(PSA) (Serum/Manometric method)	0.246	ng/ml	Normal: 0.0 - 4.0 Inflammatory & Non Malignant conditions of Prostate & genitourinary system: 4.01 - 10.0 Suspicious of Malignant disease of Prostate: > 10.0

INTERPRETATION: Analytical sensitivity: 0.008 - 100 ng/mL

PSA is a tumor marker for screening of prostate cancer. Increased levels of PSA are associated with prostate cancer and benign conditions like bacterial infection, inflammation of prostate gland and benign hypertrophy of prostate/ benign prostatic hyperplasia (BPH).

Transient elevation of PSA levels are seen following digital rectal examination, rigorous physical activity like bicycle riding, ejaculation within 24 hours.

PSA levels tend to increase in all men as they age.

Clinical Utility of PSA:

• In the early detection of Prostate cancer.

• As an aid in discriminating between Prostate cancer and Benign Prostatic disease.

• To detect cancer recurrence or disease progression.



Anusha
Dr Anusha.K.S
Sr.Consultant Pathologist
Reg No : 100674

APPROVED BY

-- End of Report --

Name	RAMAKRISHNA R	ID	IND595219
Age & Gender	50-Male	Visit Date	29-11-2023 16:32:21
Ref Doctor Name	MediWheel		

2 D ECHOCARDIOGRAPHIC STUDY

M mode measurement:

AORTA	:	3.0cms
LEFT ATRIUM	:	3.7cms
AVS	:	----
LEFT VENTRICLE (DIASTOLE)	:	4.7cms
(SYSTOLE)	:	3.2cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.3cms
POSTERIOR WALL (DIASTOLE)	:	0.7cms
(SYSTOLE)	:	1.4cms
EDV	:	104ml
ESV	:	40ml
FRACTIONAL SHORTENING	:	33%
EJECTION FRACTION	:	62%
EPSS	:	---
RVID	:	1.8cms

DOPPLER MEASUREMENTS:

MITRAL VALVE	:	E' 0.77 m/s	A' 0.64 m/s	NO MR
AORTIC VALVE	:	1.36 m/s		NO AR
TRICUSPID VALVE	:	E' - m/s	A' - m/s	NO TR
PULMONARY VALVE	:	0.96 m/s		NO PR

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Age & Gender	50-Male	Visit Date	29-11-2023 16:32:21
Ref Doctor Name	MediWheel		

2D ECHOCARDIOGRAPHY FINDINGS:

Left ventricle : Normal size, Normal systolic function.
No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapsed.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

IMPRESSION:

- **NORMAL SIZED CARDIAC CHAMBERS.**
- **NORMAL LV SYSTOLIC FUNCTION. EF:62 %.**
- **NO REGIONAL WALL MOTION ABNORMALITIES.**
- **NORMAL VALVES.**
- **NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.**

**DR. K.S. SUBRAMANI, MBBS, MD, DM (CARDIOLOGY) FESC
SENIOR CONSULTANT INTERVENTIONAL CARDIOLOGIST
SRI JAYADEVA INSTITUTE OF CARDIOLOGY, BANGALORE**

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Ref Doctor Name	MediWheel		

Kss/da

Note:

- * **Report to be interpreted by qualified medical professional.**
- * **To be correlated with other clinical findings.**
- * **Parameters may be subjected to inter and intra observer variations.**
- * **Any discrepancy in reports due to typing errors should be corrected as soon as possible.**

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ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size and has uniform echopattern. No evidence of focal lesion or intrahepatic biliary ductal dilatation. Hepatic and portal vein radicals are normal.

GALL BLADDER shows normal shape and has clear contents. Gall bladder wall is of normal thickness. CBD is of normal calibre.

PANCREAS has normal shape, size and uniform echopattern. No evidence of ductal dilatation or calcification.

SPLEEN shows normal shape, size and echopattern. No demonstrable Para -aortic lymphadenopathy.

KIDNEYS move well with respiration and have normal shape, size and echopattern. Cortico- medullary differentiations are well madeout. No evidence of calculus or hydronephrosis.

The kidney measures as follows:

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	9.3	1.2
Left Kidney	11.3	1.7

URINARY BLADDER shows normal shape and wall thickness. It has clear contents. No evidence of diverticula.

Prevoid: 668cc

Postvoid residue: 42cc

PROSTATE shows normal shape, size and echopattern. It measures 3.4 x 3.4 x 3.0cms (Vol:18cc).

No evidence of ascites / pleural effusion.

IMPRESSION:

➤ **NO SIGNIFICANT ABNORMALITY DETECTED.**

DR. APARNA
CONSULTANT RADIOLOGIST

A/vp

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Age & Gender	50Y/M	Visit Date	Nov 29 2023 9:47AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

Impression: Essentially normal study.



DR. APARNA

CONSULTANT RADIOLOGIST